

**PROGRAM OF STUDIES
FOR TRIBAL JUSTICE
OCCUPATIONAL CERTIFICATE OF COMPLETION**
(Submit to Graduation Office after all signatures obtained)

Student Name: _____ **Student ID:** _____

Name of Program: TRIBAL JUSTICE

Completion Date: _____

REQUIREMENTS:

Core Requirements:

Course #	Title	Credits	Term	Completed	Grade
TM 110	Tribal Court Development for Alaska Tribes	1			
TM 111	Children's Topics in Tribal Justice	1			
TM 112	Federal Indian Law in Alaska Tribes	1			
TM 113	Tribal Code Development	1			
TM 114	Tribal Justice Responses to Community and Domestic Violence	1			
TM 115	Tribal Court Administration	1			
TM 116	Juvenile Justice in Tribal Court	1			
TM 117	Tribal Court Enforcement of Decisions	1			
TM 118	Tribal Community and Restorative Justice	1			

Additional Requirements:

Total Credits Required 9

I certify that the above named student has successfully completed all of the requirements for this Occupational Certificate of Completion and request that it be posted to his/her transcript for _____ semester _____ year.

Program Head: _____ Signature _____ Date: _____
(printed name)

Campus Director: _____ Signature: _____ Date: _____
(printed name)

Dean: _____ Signature: _____ Date: _____
(Printed name)

For Enrollment Services Only:
Process date _____ Processed by _____